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Substitute for Form PTO-875										
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL	SMALL ENTITY		OTHER THAN SMALL ENTITY	
	FOR	NUME	NUMBER FILED		NUMBER EXTRA		FEE		RATE	FEE
BASIC FEE (37 CFR 1,16(a))						s	OR		s	
TOTAL CLAIMS (37 OFR 1.16(c))			minus 20 =			xs =		OR	x s_ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))		MS	minus 3 =		<del></del>	X 5 =		OR	x s =	
MU	TIPLE DEPENDE	INT CLAIM PRESE	PRESENT (37 CFR 1.1							
(2.1.1.1.1.2)						<u> </u>		OR	+5=	
"If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL	<u></u>	OR	TOTAL		
11	10 (B)	LAIMS AS AM	ENDED	- PART II		,	<b>?</b>	OTHER	R THAN	
	11 11 05	(Column 1)	_	(Column 2) HIGHEST	(Column 3)	SMALL	ENTITY	OR I	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	AODI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	. 68	Minus	" W8	=	x 5		OR	x s =	
	Independent (37 CFR 1.18(b))	ं प	Minus	** U	•	xs/=		OR	x s =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+5 =		OR		
						TOTAL			+s_ =	
5-80 (Column 1) (Column 2) (Column 3)						ADD'L FEE		OR	ADD'L FEE	
=	8-0C	(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)			1		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	68	Minus	-68		x s=		-OR	x s	
	Independent (37 CFR 1,18(b))	. 4	Minus	" L	•	x \$ =		OR	X 5_ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))					+5 /=		OR	= 2+	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)					
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT	*	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(e))	•	Minus	**	8	x s =		OR	x s =	
	Independent (37 CFR 1.18(b))	•	Minus	***	=	x s =		OR	X \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))					+s =		OR	+ \$ =	
TOTAL TO									TOTAL	
•	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".										

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.